

# SCHOOLS AND MENTAL HEALTH: EDUCATORS MAKE A DIFFERENCE

Jennifer Wand was one of the smart kids. She attended high school in a Boston suburb known for its high SAT scores and was a National Merit Scholar.

But things got rocky her junior year. She started skipping assignments, and her concentration was breaking down. “School became a place of terror for me,” Jennifer says. “I was afraid to be seen, afraid to speak. Classmates and teachers alike frightened me.”

Diagnosed with major depression, Jennifer eventually couldn’t go to school on a regular basis. She would not have graduated if one member of her school’s staff had not helped her come up with a plan to complete the English credits she needed.

“My guidance counselor said that if we could find an alternate way to get me those English credits, it would be worth it – that I was worth it. He arranged for me to get an externship at a local magazine. The school accepted it as an English credit and I was able to graduate.”

Jennifer not only graduated from high school, but also went on to graduate from Boston University with a 3.8 grade point average. Now working for a public relations firm, she says she realizes the difference a supportive high school made in her life.

That observation chimes with reports showing that schools that address mental health do make a difference. For example, studies show that schools with mental health programs have higher academic achievement, lower absenteeism and fewer behavior problems. Students who might have been expected to drop out have graduated and gone on to lead active, productive lives.

In its 2003 report, the President’s New Freedom Commission on Mental Health highlighted another reason these programs are having an impact. Serious emotional disturbances, or SEDs, affect 5-9 percent of American children and adolescents each year. That’s about one in 15, which means, on average, that at least one student in every classroom has an SED.

Defined as diagnosable mental health problems severe enough to disrupt daily

functioning, SEDs include depression and other mood disorders, anxiety disorders, conduct disorders, eating disorders, and attention-deficit/hyperactivity disorder.

Mental health and mental illness can be pictured as two points on a continuum with a range of mental health problems in between. When a mental health problem is serious, it is termed a mental illness. The term SED is used for mental illnesses in children and adolescents up to age 18.

The presidential commission envisioned a day when all students could learn in supportive, mentally healthy learning environments. Now, a continuing education program developed by the U.S. Department of Health and Human Services (DHHS), in conjunction with state mental health agencies, is taking a step in that direction.

*Eliminating Barriers for Learning* is a four-part training package, developed by the Substance Abuse and Mental Health Services Administration (SAMHSA), part of DHHS. The training provides information about teenage social-emotional wellness and suggests specific skill-based techniques to promote a healthy learning environment. It aims to:

- Increase knowledge of adolescent mental health, including risks and protective factors;
- Show teachers and staff how to develop an action plan to help students who need additional support; and
- Promote academic achievement through instructional techniques that take into account individual differences.

The program will appear on in-service training and continuing education agendas in four pilot states—North Carolina, Ohio, Pennsylvania and Wisconsin—in fall 2004. For more information, visit [www.allmentalhealth.samhsa.gov](http://www.allmentalhealth.samhsa.gov).

The continuing education package is part of a new federal initiative that aims to break down the barriers that keep people from seeking treatment for mental illnesses. The Elimination of Barriers Initiative is part of SAMHSA’s Center for Mental Health Services.

# MENTAL HEALTH: TEACHERS WHO UNDERSTAND THE ISSUES REAP BENEFITS

Karen Hocker credits her daughter's success in high school, and beyond, to teachers who knew about mental health.

"My daughter was able to attend and graduate from high school because a nurturing classroom with teachers who understood mental health issues could give her the support she needed to learn and be academically successful," said Hocker, speaking to a legislative forum in Ohio.

An individualized education plan was one factor that helped her daughter Sheena, who was diagnosed with anorexia, bulimia and depression when she was 14. That, coupled with "an environment where all students felt accepted," gave Sheena the opportunity to achieve her potential, Hocker said.

Now a leading advocate on children's mental health issues, Hocker joined other parents, teachers and administrators to tell legislators about the benefits of mental health services in schools. Her personal story, and those of others, reflected what formal studies have shown: mental health programs have direct benefits for schools.

Studies show that schools that have implemented such programs report higher academic achievement, lower absenteeism and fewer behavior problems. Students who might have been expected to drop out have graduated and gone on to lead active, productive lives.

In its 2003 report, the President's New Freedom Commission on Mental Health highlighted another reason these programs are having an impact. Serious emotional disturbances (SEDs) affect 5-9 percent of American children and adolescents each year. That's about one in 15, which means, on average, that one or more students in every classroom could be expected to have a serious emotional disturbance.

Defined as diagnosable mental disorders severe enough to disrupt daily functioning, SEDs include depression and other mood disorders, anxiety disorders, conduct disorders, eating disorders, and attention-deficit/hyperactivity disorder.

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Hocker also told the legislators that "training for all teachers in the basics of mental health could benefit all children, not just those who have diagnoses."

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- Increase knowledge of adolescent mental health, including risks and protective factors;
- Show teachers and staff how to develop an action plan to help students who need additional support; and
- Promote academic achievement through instructional techniques that take into account individual differences and the classroom climate.

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The continuing education package is part of a new federal initiative that aims to break down the barriers that keep people from seeking treatment for mental illnesses and SEDs. The Elimination of Barriers Initiative is part of SAMHSA's Center for Mental Health Services.